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# **Health & Families Council**

**Wednesday, February 8, 2006  
9:45 AM – 11:45 AM  
212 Knott Building**

## **Meeting Packet**

**(This is a joint meeting with the Health & Families Council, the Elder & Long-Term Care Committee, the Future of Florida's Families Committee, the Health Care General Committee and the Health Care Regulation Committee)**

# **Council Meeting Notice**

## **HOUSE OF REPRESENTATIVES**

**Speaker Allan G. Bense**

### **Health & Families Council**

**Start Date and Time:** Wednesday, February 08, 2006 09:45 am

**End Date and Time:** Wednesday, February 08, 2006 11:45 am

**Location:** 212 Knott Building

**Duration:** 2.00 hrs

The Health & Families Council will meet jointly with the Elder & Long-Term Care Committee, the Future of Florida's Families Committee, the Health Care General Committee, and the Health Care Regulation Committee, for a roundtable discussion on trends, opportunities, and challenges in Florida's health care delivery system.

**NOTICE FINALIZED on 01/27/2006 11:03 by ISEMINGER.BOBBYE**

# **Committee Meeting Notice**

## **HOUSE OF REPRESENTATIVES**

**Speaker Allan G. Bense**

### **Elder & Long-Term Care Committee**

**Start Date and Time:** Wednesday, February 08, 2006 09:45 am

**End Date and Time:** Wednesday, February 08, 2006 11:45 am

**Location:** 212 Knott Building

**Duration:** 2.00 hrs

The Elder & Long Term Care Committee will meet jointly with the Health & Families Council, the Future of Florida's Families Committee, the Health Care General Committee, and the Health Care Regulation Committee, for a roundtable discussion on trends, opportunities, and challenges in Florida's health care delivery system.

**NOTICE FINALIZED on 01/27/2006 11:05 by MANNING.KAREN**

# **Committee Meeting Notice**

## **HOUSE OF REPRESENTATIVES**

**Speaker Allan G. Bense**

**(AMENDED 1/27/2006 11:15:12AM)**

**Amended(1)**

### **Future of Florida's Families Committee**

**Start Date and Time:** Wednesday, February 08, 2006 09:45 am

**End Date and Time:** Wednesday, February 08, 2006 11:45 am

**Location:** 212 Knott Building

**Duration:** 2.00 hrs

The Future of Florida's Families Committee will meet jointly with The Health & Families Council, Elder & Long-Term Care Committee, the Health Care General Committee, and the Health Care Regulation Committee, for a roundtable discussion on trends, opportunities, and challenges in Florida's health care delivery system.

**NOTICE FINALIZED on 01/27/2006 11:15 by HINDS.TERRI**

# Committee Meeting Notice

## HOUSE OF REPRESENTATIVES

Speaker Allan G. Bense

### Health Care General Committee

**Start Date and Time:** Wednesday, February 08, 2006 09:45 am  
**End Date and Time:** Wednesday, February 08, 2006 11:45 am  
**Location:** 212 Knott Building  
**Duration:** 2.00 hrs

The Health Care General Committee will meet jointly with the Health & Families Council, the Elder & Long-Term Care Committee, the Future of Florida's Families Committee, and the Health Care Regulation Committee, for a roundtable discussion on trends, opportunities, and challenges in Florida's health care delivery system.

NOTICE FINALIZED on 01/27/2006 11:17 by RANDOLPH.CHERYL

# Committee Meeting Notice

## HOUSE OF REPRESENTATIVES

Speaker Allan G. Bense

### Health Care Regulation Committee

**Start Date and Time:** Wednesday, February 08, 2006 09:45 am

**End Date and Time:** Wednesday, February 08, 2006 11:45 am

**Location:** 212 Knott Building

**Duration:** 2.00 hrs

The Health Care Regulation Committee will meet jointly with the Health & Families Council, the Elder & Long-Term Care Committee, the Future of Florida's Families Committee, and the Health Care General Committee, for a roundtable discussion on trends, opportunities, and challenges in Florida's health care delivery system.

**NOTICE FINALIZED on 01/27/2006 11:17 by ALISON.CYNTHIA**



# **The Florida House of Representatives**

## **Health & Families Council**

**Allan G. Bense**  
Speaker

**Anna Holliday "Holly" Benson**  
Chair

### **JOINT MEETING OF THE HEALTH & FAMILIES COUNCIL ELDER & LONG-TERM CARE COMMITTEE FUTURE OF FLORIDA'S FAMILIES COMMITTEE HEALTH CARE GENERAL COMMITTEE HEALTH CARE REGULATION COMMITTEE**

**WEDNESDAY, FEBRUARY 8, 2006**

**9:45 AM – 11:45 PM**

**212 KNOTT BUILDING**

**1. Welcome and Opening Remarks**

*Rep. Holly Benson, Chair, Health & Families Council*

**2. Roundtable Discussion on Trends, Opportunities, and Challenges  
in Florida's health care delivery system**

Lucy D. Hadi, Secretary - Department of Children & Families

Carole Green, Secretary – Department of Elder Affairs

Bonita J. Sorensen, M.D., M.B.A., Deputy State Health Officer – Department of  
Health

Alan Levine, Secretary – Agency for Health Care Administration

Shelly Brantley, M.S.W., L.C.S.W., Executive Director – Agency for Persons with  
Disabilities

**4. Questions & Answers/Discussion – Council and Committee Members**

**5. Concluding Remarks**

*Rep. Holly Benson, Chair, Health & Families Council*





# Top Ten Trends, Opportunities & Challenges by Department

Department of Children & Families  
Department of Elder Affairs  
Department of Health  
Agency for Health Care Administration  
Agency for Persons with Disabilities

## **Trends, Opportunities and Challenges Relative to DCF Customers and the Florida Health Care System**

1. OPPORTUNITY: Explore every possible technology-enabled strategy for public/public and public/private collaboration.
2. CHALLENGE: Facilitate access to Medicaid for eligible low income Floridians through ACCESS FLORIDA. This will include improved customer service and increased efficiency of eligibility processing.
3. OPPORTUNITY: Integrate behavioral health needs of children and adults into Medicaid modernization demonstrations.
4. CHALLENGE: Facilitate access to health insurance for people transitioning from welfare to work including improved coordination of health insurance coverage provided by non-custodial parents.
5. TREND: Implementation of service delivery models—particularly for substance abuse and mental health services—that are driven by consumer direction and informed consumer choice.
6. CHALLENGE: Transform the public-funded substance abuse and mental health by redirecting system resources to recovery-focused treatment.
7. CHALLENGE: Facilitate access to health care for populations with special needs including persons who are homeless or living in homeless shelters, victims of domestic violence and their children, and refugees with cultural and language related barriers to accessing care.
8. CHALLENGE: Improve continuity of health care for children in foster care and children who have been adopted.
9. OPPORTUNITY: Improve access to and quality of publicly-funded substance abuse and mental health services through reforms in contracting that are focused on achieving positive customer outcomes.
10. CHALLENGE: Implement provisions of the Deficit Reduction Act related to nursing home eligibility and restrictions on transfers of assets.



**JEB BUSH**  
GOVERNOR

**CAROLE GREEN**  
SECRETARY

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Wednesday, February 8, 2006  
Health & Families Council  
Roundtable Discussion on Trends, Opportunities  
and Challenges in Florida's Health Care Delivery System

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The following ten issues are critical areas of concern to the Department of Elder Affairs' current focus and future outlook on helping Florida's seniors age in place, age with security, age with dignity, age with purpose, and age in an elder-friendly environment.

**Communities for a Lifetime** – The department's Communities for a Lifetime program focuses on the challenges that the following issues present for both state and local governments.

- 1) Transportation Needs.
- 2) Housing Options.
- 3) Employment for Elders.
- 4) Volunteerism & Community-Based Services.
- 5) Health & Wellness – Preventative Medicine.
- 6) Intergenerational Connections.
- 7) Elder Rights & Advocacy.

**Delivering Services to the Baby Boomers** – The department maintains a key role in dealing with issues created by Florida's increasing senior population, especially when the "Baby Boomer" generation enters the elder service network.

- 8) Integration & Coordination of Long-Term Care Services.
- 9) Disaster Preparedness.
- 10) Alzheimer's Disease & Dementia Research & Services.

<http://elderaffairs.state.fl.us>

## **Top Ten Issues from Department of Health Roundtable Discussion**

### **1. EMERGENCY ROOM DIVERSION**

- Local community-based primary care programs, such as those administered by federally funded community health centers and county health departments, provide access to health care to persons with low-incomes without health insurance so they have an alternative to going to hospital emergency rooms. Hospital emergency rooms are much more expensive setting, and are not staffed or designed to manage the care of patients over time.
- The Governor's proposed budget for Fiscal Year 2006-2007 recommends the continuation of a \$7.3 million local/state/federal partnership that increases funding to federally funded community health centers for primary care. Local dollars are matched with state general revenue, which is in turn matched with federal Medicaid dollars.

### **2. TOBACCO PREVENTION – DOH PROGRAMS**

- Although there have been substantial declines in smoking rates for middle school and high school students over the past 7 years, DOH is concerned that the declines are beginning to level off. Between 1998 and 2005, middle school smoking rates declined by 60.0% and high school rates declined by 42.7%. The Governor's recommended budget for 2006-07 includes an increase of \$1.9 million for the Youth Tobacco Intervention Program.

### **3. FLORIDA'S PRACTITIONER WORKFORCE**

#### **PHYSICIAN**

- As Florida's health care practitioner workforce strives to meet the growing needs of Florida's population, access to health care is an immediate concern.
- Florida's physician workforce is not growing as fast as its population. Although Florida has the fourth largest population among states, and has the second highest proportion of elderly persons, it is 16th nationally in the number of physicians (246 physicians per 100,000 population). The retirement of physicians, coupled with the advancing age of the "baby boomer" population, is expected to create significant problems in access to care. Unless steps are undertaken to plan and prepare for this eventuality, a situation may occur in which people may have significant difficulties in obtaining physician care.
- Primary care challenges were highlighted in a recent report by the American College of Physicians. The Nation Family Practice Physician Recruitment and Retention Advisory Committee has indicated a concern with a trend

showing a growing shortage of family practice physicians, both Allopathic and Osteopathic.

- The report indicated the following as some of the factors for this decline:
  - falling incomes,
  - difficulties in seeing patients
  - increased costs including malpractice, and
  - policies from insurers that encourage rushed office visits
- It is important to look at policies that could be put into place to address physician shortage problems. It would be important to hear from physician organizations, medical schools, and from the Graduate Medical Education Committee regarding what they believe would be successful approaches.

## **NURSING**

- Nursing shortages exist through the state and high turnover and vacancy rates are affecting access to health care. There are numerous reasons for the shortages including:
  1. Enrollment in schools of nursing is not enough to meet the projected demands.
  2. The shortage of nursing school faculty lead to restrictions in enrollments.
  3. The Average age of the RN is climbing and many are reaching retirement age.
  4. The rate of growth for RNs is the slowest in 20 years.
  5. Many nurses are leaving the profession due to job burnout and dissatisfaction with the job.
- Current nation trends indicate that there are other shortages such as pharmacists, certain medical specialties, allied health care professionals such as medical laboratory personnel, respiratory therapists, and physical therapists. These trends are having a significant effect on health care in Florida.
- The increasing senior population in Florida will require additional health care personnel and services throughout the state.
- These shortages can be addressed through recruitment and retention, streamlining of the licensure processes through technology, process improvement and expansion of medical education facilities.

## **PUBLIC HEALTH NURSING**

- Specific to Public Health, there are many challenges facing our County Health Departments.
  1. The increased number of leadership and public health workforce retiring in the next couple of years makes it imperative that recruitment and retention of public health nurses and public health workforce in general is a top priority.
  2. Even though lack of staff to provide adequate and timely services and lack of time to provide adequate education to patients so that they can understand their illness and comply with treatment faces the CHDs, we must insure client safety.
  3. We must provide education and mentoring of new public health workforce.
- The ongoing education for public health workers related to emergency preparedness and response is critical.
  1. Threats to our health and safety that the nurses and communities face in the form of natural disasters and/or emerging diseases.
  2. Disaster/Emergency Response created a need for resources for Disaster preparation, response and mitigation while maintaining the vital routine of public health initiatives and programs.
- Special Needs Shelters continue to evolve as we address the needs of special needs clients in the state relating to the adequacy of shelters, power supplies, transportation and health care delivery. The Special Needs Shelter Interagency Committee continues to work towards policy changes, operational standards and guidelines for our clients.

## **4. ACCESS TO HEALTH CARE**

- Almost one in five Floridians under the age of 65 (19.2%) lack health insurance.
- Lack of benefits for medical care, either through Medicare, Medicaid, health insurance or other benefit providers is a detriment to regular medical exams, screenings, and other preventative measures that can improve the quality of life for Floridians.
- Some of the challenges being faced by patients include:
  1. Difficulty in coordinating comprehensive services in a decentralized service delivery system.
  2. Health care providers do not always have access to a comprehensive health record.

3. Lack of access to nutrition services for older children and adults which would prevent and/or mitigate the health impacts of the rising incidence of chronic diseases in these populations.
4. Access to health care tends to be available 9-5, Monday-Friday, when the working poor can't take off from work. Encouraging community health care providers to expand hours or establish special alternative times of services, so that community needs are met would help to relieve this problem.

## 5. CHRONIC DISEASES

- Chronic Diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States. These diseases account for 7 of every 10 deaths and affect the quality of life of 90 million Americans. Although chronic diseases are among the most common and costly health problems, they are also among the most preventable. Adopting healthy behaviors such as eating nutritious foods, being physically active, and avoiding tobacco use, can prevent or control the devastating effects of these diseases.
- In Florida in 2002, chronic diseases accounted for 71% of all deaths. Cardiovascular disease alone accounted for 38% of all deaths. Regular physical activity reduces the risk of dying from cardiovascular disease and developing diabetes or hypertension, and also aids in weight control and maintaining healthy bones, muscles, and joints. In 2002, 27.9% of Florida adults were considered sedentary (participated in no leisure-time physical activities), and only 21.4% participated in regular, vigorous exercise.
- From the CDC publication: The State of Aging and Health in America 2004. "In the United States, 20% of all Americans, or about 70 million people, will have passed their 65th birthday by 2030. The demographic tidal wave is coming. Aging in the 21st century, however, is more than just a matter of numbers. The average 75-year-old has three chronic conditions and uses five prescription drugs."
  - Goals for Improving the Health of Older Americans include:
    - To achieve the national goals for reducing health risk behaviors.
    - To increase opportunities for all older Americans to reap the benefits of regular physical activity.
    - To encourage states and communities to adopt innovative methods to promote healthy aging among the adults they serve.
- To assist in meeting these goals, MIAH, CDC and GSA have included Calls to Action on the following topics related to older adult health:
  1. Monitoring recent physical health.
  2. Addressing frequent mental distress.
  3. Improving oral health.

4. Promoting healthy behaviors.
5. Increasing the use of clinical preventive services.
6. Implementing a national falls prevention plan.
7. Increasing physical activity among older adults.
8. Preparing our health care workforce for an aging society.

## **6. DENTAL**

- Despite the advances and improvements in oral health, dental care remains one of the most prevalent unmet health needs. Disparities in oral health status and access to care affect many persons, but mainly those with low-incomes, members of racial and ethnic minority groups, and the disabled.
- These groups have 2-3 times the dental needs of the average person and have the least access to dental care. Only 11% of low-income persons below 200% of the federal poverty level received at least an annual dental visit through publicly funded and volunteer programs, their main sources of care - 22% for children and 4% for adults. The national average for persons above 200% of the federal poverty level is around 60%.
- Opportunities exist to address these dental care issues. They include:
  1. Continue to expand community and school-based preventive programs (fluoridation and sealants.)
  2. Develop a monitoring system to document oral health status (surveillance.)
  3. Continue to expand community-based and volunteer safety net programs  
Improve utilization of existing dental workforce for public health facilities  
Improve the utilization of medical personnel to identify oral diseases, make appropriate referrals and provide primary prevention.
  4. Develop the use of teledentistry to more efficiently utilize the dental workforce.

## **7. INFANT, MATERNAL, AND REPRODUCTIVE HEALTH**

### Trends and Challenges

- Transportation to health care services has been identified as a challenge in the MCH five-year needs assessment, Family Planning Program needs assessment, and in the Healthy Start Coalitions' community assessments. Recent increases in gas prices have significantly impacted access to care for both clients accessing services from a health care provider and health care provider that provide home visitation services.
- There is an increase in the number of women of child-bearing age without health care coverage. 28% of Family Health Line pregnant callers stated that



they were not receiving prenatal care due to lack of insurance coverage or financial resources to access care.

- Cervical Cancer screening technology remains an issue. Research studies are not definitive concerning liquid medium pap technology being better than the conventional pap. In the public health setting, not definite if the advanced technology yields sufficient cost savings to replace the conventional technology.

#### Opportunities:

- Explore the possibility of a multi-agency study with different age groups to identify which Pap technology is best to use for what population of women and how frequent should cervical cancer screening should be provided.

### **8. ADOLESCENT HEALTH**

#### Trends:

- Obesity - Children who are overweight are at a greater risk for adult onset diabetes, increased severity of asthma, and hypertension.
- Unintentional injuries are the leading cause of death for children and youth, and the fourth leading cause of death for infants less than one year in age.
- Many of the health problems that confront youth today are not typical medical issues. Instead, they are largely behavior and social issues that can result in immediate consequences (death in a car crash), lasting social and economic costs (teen pregnancy) and future chronic health problems (smoking, poor diet and lack of exercise).

#### Opportunities:

- Youths who are provided support throughout childhood and adolescence are more likely to become healthy, competent, and skilled members of society.
- Promotion of healthy development - Focus on children and young people's assets, promoting healthy development, and adopting non-categorical, ecological strategies that address the multi-level influences on child and adolescent health, such as family, community, schools, society and policy.
- Development and dissemination of report cards on adolescent behaviors related to health.
- Development of a seamless coordination with other agencies serving adolescents or strategies to assure that common issues of risky health behaviors are integrated into other services.

### **9. SCHOOL HEALTH**

- Visits to school health rooms staffed by nurses are more likely to result in students returning to class, reducing the loss of classroom learning time; successfully resolved school health room visits reduce lost work time from parents picking up their children for minor health issues.
- In addition to visits for injuries and acute care, approximately 16% of Florida's kindergarten through 12th grade students have chronic or complex health conditions that need monitoring and services, during the school day. Registered school nurses not only provide health assessment, care planning and services in school, but also refer students for preventive and primary care in their communities. This facilitates access to non-emergency health care services, reduces the patient burden in Florida's emergency rooms and the state's Medicaid expenditures.

## **10. DISEASE CONTROL**

### **Immunization**

- Influenza vaccine: The supply of influenza vaccine has been unstable for the past 4-5 years. Health care providers, both public and private, have had difficulty providing vaccine to their at-risk population and have lost confidence in the influenza vaccine manufacturing and delivery process.
- The Association of State and Territorial Health Officials (ASTHO) made the following two recommendations in January, 2006.
  1. State Health Agencies should be provided with pre-booking, distribution, and shipping data for all flu vaccine within their jurisdiction. Such information should be provided from all manufacturers and distributors, in a secure format, and with provider-level detail.
- During an influenza pandemic, federal, state, and local governments, working collaboratively, must be responsible for determining the allocation and distribution of scarce flu vaccine to ensure that designated high priority populations in all states receive vaccine, as it becomes available, in priority order.

## **11. BIOMEDICAL RESEARCH**

- To compete with other states, and avoid "brain drain", Florida must continue to invest in initiatives to support biomedical and biotechnology research. The Governor's recommended budget for 2006-07 includes an increase from \$10 million to \$19 million to support research initiatives.
- The Governor's proposed FY 06-07 budget includes funding for Science-based Research Projects, World Class Scholars and Centers of Excellence, and Venture Capital to promote Florida's journey toward being first in biomedical research and cures for disease.

- Compared with other states, Florida universities rank relatively low in NIH funding. In NIH's ranking of the top 500 institutions for 2004, Florida leading research institute is only 58<sup>th</sup>.

**The Agency for Health Care  
Administration's Top Ten Trends  
Will Be Available at the  
Council/Committee Meeting**

## **Agency for Persons with Disabilities Top Ten Medical Priorities for 2006**

- **D**evelopment of available capacity of health care professionals (physicians, dentists, clinical psychologists and allied health care) who have appropriate training and experience in treating children, adolescents and adults, including those from socio-economically and linguistically diverse communities
- **A**ccess Psychiatric/Psychological/Mental Health services for individuals with developmental disabilities who, like the general population, have service needs but require customized delivery methods
- **D**ecrease the statewide nursing shortage, which greatly affects the ability to serve individuals with developmental disabilities who have complex or ongoing medical needs in community settings
- **D**evelop specialized programming and treatment options for aging persons with developmental disabilities and their caregivers.
- **E**nsure access to preventative medicine for those individuals with developmental disabilities
- **R**esearch, evaluate and fill medical insurance coverage gaps experienced by individuals with developmental disabilities
- **S**upport continued and expanded efforts in the areas of infant screening and genetics research and service provision
- **P**rovide and support consistent behavioral health services to persons with developmental disabilities across all home, education and employment systems
- **D**evelop adequate and accurate medical history and data for the healthy existence of all Floridians with developmental disabilities
- **C**ontinue to provide education and awareness and training to clients, families and staff concerning the Zero Tolerance Against Sexual Violence



Resources from NCSL's  
Emerging Leaders Meeting,  
Winter 2005

## **Resources:**

**Source:** National Conference of State Legislatures

**Emerging Leaders Meeting, Winter 2005**

<http://www.ncsl.org/programs/health/forum/chapsdec05.htm>

## **Addiction Prevention and Treatment**

### **Reliable Information about Drugs**

The federal government finances most of the scientific research that tracks the extent of the drug problem in the United States. One way to find this information quickly is via a chart prepared by the White House Office of National Drug Control Policy. The chart contains numerous links that will take you directly to the source information. <http://www.whitehousedrugpolicy.gov/drugfact/sources.html>

### **Drug Effects**

Three federal agencies finance nearly all of the biomedical research about the effects of drugs on the brain and body. The first two listed here are National Institutes of Health.

**Drugs** <http://www.nida.nih.gov/>

**Alcohol** <http://www.niaaa.nih.gov/>

**Tobacco** <http://www.cdc.gov/>

### **Prevalence**

The nation's two benchmark surveys track drug use among various age groups. They are:

<http://monitoringthefuture.org/> and <http://www.oas.samhsa.gov/nsduh.htm>

### **Consequences**

The Drug Abuse Warning Network (DAWN) records hospital emergency room admissions for drug problems and drug related deaths from medical examiners' reports. The Robert Wood Johnson Foundation has released a comprehensive report on the cost of substance abuse to the nation, which is a rich resource for journalists. <http://dawninfo.samhsa.gov/> and <http://www.rwjf.org/publications/substanceAbuseChartbook.jhtml>

### **Treatment**

A rich body of research about effective treatment for drug addiction is available from the National



Institute on Drug Abuse. The Substance Abuse and Mental Health Services Administration houses the nation's treatment services agency, the Center for Substance Abuse Treatment, and maintains a directory of treatment facilities, which can be searched by zip code.

<http://www.nida.nih.gov/PODAT/PODATIndex.html>, <http://csat.samhsa.gov/>, and <http://www.findtreatment.samhsa.gov/>

### **Prevention**

A rich body of research about effective substance abuse prevention is available from the National Institute on Drug Abuse. The Substance Abuse and Mental Health Services Administration also houses the nation's prevention services agency, the Center for Substance Abuse Prevention and maintains a registry of evidence-based effective programs. Columbia University hosts the National Center on Addiction and Substance Abuse, which conducts research on substance abuse prevention. Community Anti Drug Coalitions of America consists of local coalitions across the nation. National Families in Action helps parents prevent drug abuse in their families and communities. <http://prevention.samhsa.gov/>, <http://www.modelprograms.samhsa.gov/>, <http://www.casacolumbia.org/>, <http://cadca.org/>, and <http://www.nationalfamilies.org/>

### **Policy Research**

The Robert Wood Johnson Foundation has a national program office, the Substance Abuse Policy Research Program, that focuses on substance abuse policy research. <http://www.saprp.org/>

### **State Substance Abuse Policy**

The Treatment Research Institute's Center for Evidence-Based Policy and the National Conference of Legislatures are the national resources for state substance abuse policy. <http://www.tresearch.org/>, <http://www.ncsl.org/programs/health/saldata.htm>, <http://www.ncsl.org/programs/health/forum/saguidebook.htm>, <http://www.ncsl.org/programs/health/satmeasure.htm>, and <http://www.addictionstudies.org/>

**Your Critical Health Area Project (CHAP) staff on substance abuse and addiction is: Allison Colker, [allison.colker@ncsl.org](mailto:allison.colker@ncsl.org), 202.624.3581**

### **Access to Coverage**

*The State Coverage Matrix* is a deceptively simple table of state policies related to access. Click on any of the cells in the table, and you go to a page that describes the program and links to related sites, including state and national reports on the program. Click on a header and you'll get a description of the category and a table with thumbnail sketches for each state in the category. And of course, clicking on the state will

take you to links for all of its access programs. This site is part of the Robert Wood Johnson Foundation's (RWJ) State Coverage Initiative at AcademyHealth. <http://www.statecoverage.net/matrix.htm>

Lots of other resources are available on this site including a database of state reports, and publications on coverage from AcademyHealth.

***State Health Facts***, brought to you by the Henry J Kaiser Family Foundation, is a great starting point for background information and interstate comparisons. It is very easy to use and contains a wealth of state data. You can look at information by state or nationally, and tailor comparisons using maps or tables. Information can be sorted by state name, rank or region. Public Insurance is Kaiser's strong suite, and that shows in strong details for Medicaid, Medicare and SCHIP, but this site also has a wealth of information on demographics, health status, health costs, insurance, <http://www.statehealthfacts.org/>

While you are on the Kaiser site, you may also want to check out their latest reports (<http://http://www.kff.org/>), see what new webcasts are available at <http://kaisernetwork.org/> and explore the background material they've created for policy students at <http://www.kaiseredu.org/>

***The Centers for Medicare & Medicaid Services*** (CMS) is the federal agency concerned with these two public insurance programs. <http://www.cms.hhs.gov/researchers/default.asp> takes you to a variety of federal data resources related to Medicaid and Medicare. <http://www.cms.hhs.gov/researchers/statsdata.asp> lists available data. Note the dates. It still takes a couple of years to reconcile and clean up data for the national compilation. The Kaiser site listed above also summarizes much of their data and may be easier to use.

***Center for Studying Health System Change*** (HSC) designs and conducts studies focused on the U.S. health care system and the national and local market forces driving change. It is an excellent source for data on current trends and policy-oriented analysis. This project is also funded by RWJ. <http://www.hschange.com/>

### **Some other sources for information on health coverage and access policies**

In addition to RWJ and Kaiser, a number of foundations support coverage expansions and in some cases publish results of research and program activities. Among them:

Additional ***RWJF***-sponsored coverage research is summarized at <http://www.rwjf.org/research/researchlist.jsp?ia=132>

**Kaiser** is particularly noteworthy for the research that it funds on Medicaid, SCHIP and the uninsured.

<http://www.kff.org/medicaid/index.cfm>; <http://www.kff.org/uninsured/index.cfm>

The **Commonwealth Fund** supports and publishes research on private coverage approaches.

[http://www.cmwf.org/topics/topics.htm?attrib\\_id=12001&portal=yes](http://www.cmwf.org/topics/topics.htm?attrib_id=12001&portal=yes)

**Kellogg Foundation** projects include Community Voices

<http://www.wkcf.org/Programming/Overview.aspx?CID=7>

A trio of other research and advocacy organizations with a focus on access: <http://www.cbpp.org/> – **Center**

**for Budget and Policy Priorities** focuses on publicly funded programs; <http://www.ebri.org/> -- **Employer**

**Benefit Research Institute** pays special attention to coverage issues that affect employers, particularly

large ones. They publish annual analyses of the number of uninsured, based on the March Census survey;

<http://www.ncpa.org/> **The National Center for Policy Analysis** emphasizes market-based strategies.

#### **More Links about the Presentations**

**Eric Baumgartner** recommends the following links:

Communities Joined in Action <http://www.cjaonline.net/>

American Project Access Network <http://www.apanonline.org/>

A report on a 2000 conference that **Eric Baumgartner** organized includes links and descriptions of many of these programs. <http://www.conferencereports.com/innovations/>

**Illinois AllKids** link <http://www.allkidscovered.com/>

Summary of AllKids program from Kaiser reports

[http://www.kaisernetwork.org/daily\\_reports/rep\\_index.cfm?hint=3&DR\\_ID=33766](http://www.kaisernetwork.org/daily_reports/rep_index.cfm?hint=3&DR_ID=33766)

CMS Illinois page includes links to current Illinois waivers including Kidcare (their SCHIP program).

<http://www.cms.hhs.gov/medicaid/state.asp?state=IL>

#### **Some NCSL Resources**

**State Health Lawmakers Digest** on Individual Coverage

<http://www.ncsl.org/programs/health/forum/54.htm>

Web page on State Medicaid Reforms including recent sec. 1115 waivers

<http://www.ncsl.org/programs/health/1115waivers.htm>; other Medicaid info at NCSL

<http://www.ncsl.org/programs/health/medicaid.htm>; universal health—state legislation

<http://www.ncsl.org/programs/health/universalhealth.htm>; health savings accounts (HSAs)

<http://www.ncsl.org/programs/health/hsa.htm>

**Your Critical Health Area Project (CHAP) staff on Access is: Kala Ladenheim**  
**([Kala.ladenheim@ncsl.org](mailto:Kala.ladenheim@ncsl.org)), 202-624-3557**

## **Quality Care for People with Chronic Conditions**

### **Information about chronic disease**

Overview of the most common chronic diseases and their prevalence including information on costs:

<http://www.cdc.gov/nccdphp/overview.htm>

Overview "At a Glance" reports on common chronic diseases: <http://www.cdc.gov/nccdphp/publicat.htm>

State profiles on chronic disease: <http://www.cdc.gov/nccdphp/states/index.htm>

Overview of chronic disease: <http://www.partnershipforsolutions.com/DMS/files/chronicbook2004.pdf>

### **Cost impacts**

Power point presentation about the burden of chronic disease including costs: [http://www.cdc.gov/nccdphp/burden\\_pres/](http://www.cdc.gov/nccdphp/burden_pres/)

*The Burden of Chronic Diseases and their risk factors*, 2004:

[http://www.cdc.gov/nccdphp/burdenbook2004/pdf/burden\\_book2004.pdf](http://www.cdc.gov/nccdphp/burdenbook2004/pdf/burden_book2004.pdf)

Costs associated with obesity: [http://www.cdc.gov/nccdphp/bb\\_nutrition/index.htm](http://www.cdc.gov/nccdphp/bb_nutrition/index.htm)

### **Treatment**

Evidence-based practice: <http://ahrq.gov/clinic/epcix.htm>

Information on effective healthcare: <http://effectivehealthcare.ahrq.gov/aboutUs/index.cfm>

### **Disease Management**

Chronic Care Model: <http://www.improvingchroniccare.org/change/index.html>

Indiana Chronic Disease Management Program: <http://www.indianacdmprogram.com/>

Definition of Disease Management: <http://www.dmaa.org/definition.html>

## **Quality**

The Robert Wood Johnson Foundation Quality Health care  
site: <http://www.rwjf.org/portfolios/interestarea.jsp?iaid=142>

Fact sheets on quality: <http://ahrq.gov/consumer/index.html>

National Quality Measures Clearinghouse: <http://www.qualitymeasures.ahrq.gov/>

Information on quality and patient safety: <http://ahrq.gov/qual/>

Institute of Medicine Health Care Quality Initiative: <http://www.iom.edu/focuson.asp?id=8089>

## **Prevention**

*Promising Practices in Chronic Disease Prevention and Control: A Public Health Framework For Action,*  
2003: [http://www.cdc.gov/nccdphp/promising\\_practices/index.htm](http://www.cdc.gov/nccdphp/promising_practices/index.htm)

Reports on prevention and wellness: <http://ahrq.gov/consumer/index.html>

Information on preventive services: <http://ahrq.gov/clinic/prevenix.htm>

Prevention Fact Sheets: <http://www.cdc.gov/nccdphp/publicat.htm>

Databases with information on chronic disease prevention: <http://www.cdc.gov/nccdphp/publicat.htm>

## **Research**

Research Fact sheets: <http://ahrq.gov/news/factix.htm>

Information on chronic care: <http://ahrq.gov/populations/chronix.htm>

## **Data**

Interactive databases that track chronic disease trends: <http://www.cdc.gov/brfss/>

*The Burden of Chronic Diseases and their risk factors*, 2004, includes state profiles:

<http://www.cdc.gov/nccdphp/burdenbook2004/index.htm>

### **State Programs**

Information on exemplary state programs: <http://www.cdc.gov/nccdphp/exemplary/index.htm>

Examples of state activities: [http://www.cdc.gov/nccdphp/bb\\_nutrition/index.htm](http://www.cdc.gov/nccdphp/bb_nutrition/index.htm)

### **Presenters Resources:**

Irene Fraser, Agency for Healthcare Research and Quality: <http://ahrq.gov/>

Nikki Highsmith, Center for Health Care Strategies, Inc. : <http://www.chcs.org/>

Doug Stratton, 317-877-5376 [stratton@insightbb.com](mailto:stratton@insightbb.com)

### **NCSL Resources:**

Chronic Disease Prevention and Health promotion: <http://www.ncsl.org/programs/health/chronic-new.htm>

Disease Prevention and Control: <http://www.ncsl.org/programs/health/chronicdisprev.htm>

Disease Management: <http://www.ncsl.org/programs/health/dmres.htm>

### **NCSL Contacts:**

**Critical Health Area Project Staff person on Quality Care for People with Chronic Conditions--**

**Carla Curran ([carla.curran@ncsl.org](mailto:carla.curran@ncsl.org)) 303-856-1373**

**Prevention of chronic disease--Amy Winterfeld ([amy.winterfeld@ncsl.org](mailto:amy.winterfeld@ncsl.org)) 303-856-1544**

### **Workforce/Nursing Resources**

Helpful general resources

Kaiser Family Foundation general state health news <http://statehealthfacts.org/cgi-bin/healthfacts.cgi>

State level census data <http://www.census.gov/acs/www/>

Health, United States is an annual report on national trends in health statistics including highlights, a chartbook, and trend tables with statistics on such topics as birth and death rates, infant mortality, life expectancy, morbidity and health status, risk factors, use of ambulatory and inpatient care, health personnel and facilities, financing of health care, health insurance and managed care, drug utilization, and other health topics. <http://www.cdc.gov/nchs/hus.htm>

Health Professionals in general

Association of American Medical Colleges <http://www.aamc.org/>

The Center for the Health Professions, University of California, San Francisco  
<http://www.futurehealth.ucsf.edu/cchws.html>

HRSA Bureau of Health Professionals

National Center for Health Workforce Analysis (includes state health workforce profiles, reports such as “The Health Care Workforce: Education, Practice & Policy” and databases, etc.)<http://bhpr.hrsa.gov/healthworkforce/default.htm>

American Medical Association <http://www.ama-assn.org/>

Time-capsule thinking: the health care workforce, past and future at [Health Affairs](#).

Nurses

American Nurses Association <http://www.nursingworld.org/>

States Tackle the Nursing Shortage by Kristine Goodwin (State Legislatures magazine)  
<http://www.ncsl.org/programs/pubs/1002nurse.htm>

Nursing workforce retention: challenging a bullying culture at [Health Affairs](#).

Trends in the Supply of Physician Assistants and Nurse Practitioners in the United States at [Health Affairs](#).

Arching the flood: how to bridge the gap between nursing schools and hospitals at [Health Affairs](#).

Trends: New Signs Of A Strengthening U.S. Nurse Labor Market?  
<http://content.healthaffairs.org/cgi/reprint/hlthaff.w4.526v1?>

## Midwives

The Future of Midwifery by Catherine Dower, J. Miller and Ed O'Neil

[http://futurehealth.ucsf.edu/pdf\\_files/midwifry.pdf](http://futurehealth.ucsf.edu/pdf_files/midwifry.pdf)

## Dentists

State Experience with Dental Loan Repayment Programs <http://www.ncsl.org/print/health/sedlrp%20.pdf>

The growing challenge of providing oral health care services to all Americans at [Health Affairs](#).

## Diversity

Racial Diversity in the Health Professions in California – presentation by Catherine Dower

<http://www.latinomedjournal.com/uploads/Catherine%20Dower.ppt>

The case for diversity in the health care workforce at [Health Affairs](#).

**Your Critical Health Area Project (CHAP) staff on workforce is: Tara Lubin, [Tara.lubin@ncsl.org](mailto:Tara.lubin@ncsl.org), 202-624-3558**

## Other Background Materials for Critical Health Areas Program (CHAP)

*NCSL Building Blocks: An Orientation to Health Policy for State Legislators*

*Frequently Asked Questions...*

This set of briefing papers on important health policy topics is part of an orientation package for state legislators on the fundamentals of state health policy. Each paper provides basic, introductory information on policy and program areas in the form of most frequently asked questions (FAQs) by legislators and brief, objective and non-technical answers. Areas covered by this series include: Health Care Access, Health Care Economics, Insurance and Managed Care, Long-Term Care, Medicaid, Mental Health, Prescription Drugs, Public Health, Health Care Quality, SCHIP, Substance Abuse, and the Health Care Workforce. <http://www.ncsl.org/programs/health/forum/faqpreface.htm>

Subscribe to *State Health Notes* <http://www.statehealthnotes.org/>

*“Introduction to State Health Policy: A Seminar for New State Legislators,”* March 31-April 3, 2005, Chicago, IL. The Agency for Healthcare Research and Quality (AHRQ) and the National Conference of



State Legislatures (NCSL). Archived audio streams of the following sessions are available at <http://www.hsrnet.net/ahrq/newleg/>

Archived sessions: Roles of State Legislatures and State Government in Determining Health; State Roles in Regulating Health Care Markets: Balancing Cost, Access & Quality; Quality and Cost: Achieving Value in Today's Health Care System; Understanding the Importance of Public Health; Providing Access to Care, Part I: The Uninsured and the Health Care Safety; Hot Issues in Health Care: Focus on Medicaid and SCHIP; Health Care Workforce Issues; The Crisis in Medical Malpractice Insurance; Prescription Drugs; and Cost Quality, and Access: Providing Long-Term Care Services to an Increasingly Elderly and Chronically Ill Population.

Other programs from the Agency for Healthcare Research and Quality on a variety of topics that may be of state interest may be found at <http://www.ahrq.gov/news/ulp/ulpprwrk.htm>

The Robert Wood Johnson Foundation, in addition to supporting this project at NCSL, funds projects and supports research around the country in all the policy areas covered in CHAP. Go to their website to subscribe to updates, or to see the latest findings in these and other areas. <http://www.rwjf.org/index.jsp>

The National Library of Medicine maintains an annotated list of sites with health data and health services research at <http://www.nlm.nih.gov/hsrinfo/hsrsites.html>

Duke University has attempted to identify a single gateway to health policy information for each individual state in its *State Health Policy Web Portal*.

[http://www.hpolicy.duke.edu/cyberexchange/whats\\_what/state/states.htm](http://www.hpolicy.duke.edu/cyberexchange/whats_what/state/states.htm)

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### **Contact Information**

For additional information please e-mail us at [health.chaps@ncsl.org](mailto:health.chaps@ncsl.org). Find an expert for your issue at the Forum.



OPPAGA Reports, Health &  
Human Services Policy Area  
January 2001- January 2006

**OPPAGA Reports, Health and Human Services Policy Area  
As of January 2006**

Report No.	Report Title	Published Date
<b>Children &amp; Families, Dept of</b>		
06-05	OPPAGA Report: Additional Improvements Are Needed as DCF Redesigns Its Lead Agency Oversight Systems	01/06
05-61	OPPAGA Report: Improvements in Independent Living Services Will Better Assist Struggling Youth	12/05
05-47	OPPAGA Report: Child Welfare Legal Services Makes Some Improvements, But Other Changes Needed	09/05
05-40	OPPAGA Report: After Further Delay, DCF Redesigning Child Welfare Training and Taking Steps to Clarify Case Transfer	08/05
05-17	OPPAGA Report: The Substance Abuse and Mental Health Corporation Has Not Addressed Its Responsibilities Fully	03/05
05-12	OPPAGA Report: Child Welfare Transition Nearly Complete; Budget Allocation and Oversight Systems Need Strengthening	03/05
05-07	OPPAGA Report: Centralizing DCF Substance Abuse and Mental Health Programs Provides Benefits But Also Challenges	02/05
05-01	OPPAGA Report: Economic Impact of Homelessness Is Significant; Improvements Needed at State and Local Levels	01/05
04-78	Information Brief: Independent Living Minimum Standards Recommended for Children in Foster Care	11/04
04-73	OPPAGA Report: Most Adult Protection Working Agreements Signed, But Have Had Limited Effectiveness	10/04
04-67	Progress Report: DCF Implements Recommendations, But Some Delays Still Occurring in Residential Mental Health Assessment Process	09/04
04-65	OPPAGA Report: DCF Improves Readiness Assessment Process; However, Additional Changes Are Needed	09/04
04-63	Progress Report: Sexually Violent Predator Program Is Reducing Backlog, But Still Not Timely	08/04
04-55	Progress Report: Children's Advocacy Centers Authorized to Receive State Funds, But Need Additional Accountability	08/04
04-39	Information Brief: Many Children Receiving Intensive Exceptional Student Education Services Are Served by Multiple Programs; No Unnecessary Duplication of Services Found	06/04
04-25	Progress Report: No Lead Agencies Have Earned Excess Federal Funds for Several Years	03/04
04-15	Special Report: DCF's Lead Agency Readiness Assessment Process Meets Statutory Requirements, But Needs Strengthening	02/04
04-05	Special Report: Child Welfare Legal Services Should Be Provided by DCF or Private Law Firms	01/04
04-03	Special Report: DCF Needs to Improve Child Protection Staff Training and Clarify DCF and Lead Agency Roles	01/04
03-52	Justification Review: Economic Self-Sufficiency Performance Mixed; Food Stamp Improvements Could Yield Federal Bonuses	10/03
03-48	Developmental Disabilities Program Takes Action on Some Recommendations; Still Needs to Address Service Issues to Better Meet Its Client Needs	09/03
03-29	Special Review: Non-Residents Qualify Too Easily for Much Lower Resident Tuition Rates	04/03
03-09	Progress Report: Child Protection Program Makes Needed Changes But Lacks Data for Evaluating Results of Initiatives	01/03
03-08	Progress Report: Improvements Needed in the Department of Children and Families Adult Services Program	01/03
03-03	Special Review: Residential Mental Health Assessment Process Working Well with Minor Delays	01/03

Report No.	Report Title	Published Date
02-65	<i>Progress Report: The Department Still Lacks Data Needed to Assess the Child Safety Administrative Review Process</i>	12/02
02-61	<i>Progress Report: Child Care Program Implements Recommendations to Improve Licensing and Enforcement Activities</i>	11/02
02-54	<i>Progress Report: Delays Reduced But Persist in the State's Juvenile Competency Program</i>	10/02
02-46	<i>Progress Report: Mental Health Institutions Program Acted on Three OPPAGA Recommendations</i>	09/02
02-44	<i>Special Review: Children's Advocacy Centers Appear Beneficial But Have Limited Accountability</i>	08/02
02-19	<i>Progress Report: Domestic Violence Program Improves Coordination, But Lacks Data on Long-Term Effects of Services</i>	03/02
02-18	<i>Progress Report: Developmental Disabilities Program Takes Steps to Improve Medicaid Waiver Systems and Controls</i>	03/02
02-16	<i>Justification Review: Child Protection Program, Department of Children and Families</i>	03/02
02-09	<i>Program Review: Legislative Options to Control Rising Developmental Disabilities Costs</i>	02/02
01-38	<i>Program Review: Legislature Should Establish Foster Care Excess Federal Earnings Program Despite Slow Start</i>	08/01
01-34	<i>Progress Report: Alcohol, Drug Abuse and Mental Health Program Taking Steps to Implement Recommendations</i>	07/01
01-14	<i>Justification Review: Child Protection Program</i>	03/01
01-08	<i>Justification Review: DCF's Adult Services Program Meeting Goals; Data Reliability, Case Management Need Work</i>	02/01
01-06	<i>Performance Review: Client Characteristics and Outcomes Are Similar for Both Administrative and Judicial Review of Child Abuse Cases</i>	02/01
<b>Elder Affairs, Dept of</b>		
05-45	<i>OPPAGA Report: Aging Resource Center Initiative Is Moving Ahead, But Needs Additional Work</i>	08/05
05-06	<i>OPPAGA Report: DOEA Has Taken Reasonable Steps to Begin the Aging Resource Center Initiative</i>	02/05
03-69	<i>Progress Report: Services to Elders Program Has Improved Accountability and Oversight; Should Reduce Capitation Rate for Long-Term Care Pilot</i>	12/03
01-66	<i>Justification Review: Services to Elders Program, Department of Elder Affairs</i>	12/01
01-04	<i>Program Review: High-Risk Elder Victims of Abuse, Neglect, or Exploitation Quickly Served; Data Problems Remain</i>	01/01
<b>Health Care Administration, Agency for</b>		
06-07	<i>OPPAGA Report: Inflated Pricing and Confidential Information Prevent Medicaid from Ensuring Lowest Prescription Drug Price</i>	01/06
05-62	<i>OPPAGA Report: A Medicaid Buy-in Program Would Increase Health Care Access for the Uninsured But Also Increase State Costs</i>	12/05
05-03	<i>OPPAGA Report: Continuing Certain Medicaid Options Will Increase Costs, But Benefit Recipients and the State</i>	01/05
04-84	<i>OPPAGA Report: Legislature Has Several Options for Florida's KidCare Family Premiums</i>	12/04
04-77	<i>Progress Report: AHCA Takes Steps to Improve Medicaid Program Integrity, But Further Actions Are Needed</i>	11/04
04-53	<i>Progress Report: Medicaid Should Improve Cost Reduction Reporting and Monitoring of Health Processes and Outcomes</i>	08/04
04-34	<i>Progress Report: Medicaid Disease Management Initiative Has Not Yet Met Cost-Savings and Health Outcomes Expectations</i>	05/04
04-30	<i>Special Report: Medicaid Field Offices Can Improve Efficiency and Effectiveness; State Could Outsource Some Activities</i>	05/04

Report No.	Report Title	Published Date
03-27	<i>Progress Report: Changes to Medicaid Preferred Drug List Requirements and Competitive Bidding Pharmacy Contracts Could Save an Additional \$86.6 Million in 2003-04</i>	04/03
03-15	<i>Information Brief: Uncertainty Exists Regarding Florida's Proposed Physician Upper Payment Limit Program</i>	02/03
03-11	<i>Special Review: Legislative Options for County Share of Medicaid Nursing Home Costs</i>	02/03
02-02	<i>Program Review: Healthy Kids Slots Used; Waiting Lists Eliminated, But Could Reoccur If Local Match Is Reinstated</i>	01/02
01-61	<i>Justification Review: Expected Medicaid Savings Unrealized; Performance, Cost Information Not Timely for Legislative Purposes</i>	11/01
01-50	<i>Program Review: Consolidation of Medical Quality Assurance Governance Structure Only a Partial Solution</i>	10/01
01-39	<i>Justification Review: Medicaid Program Integrity Efforts Recover Minimal Dollars, Sanctions Rarely Imposed, Stronger Accountability Needed</i>	09/01
01-27	<i>Justification Review: Medicaid Disease Management Initiative Sluggish, Cost Savings Not Determined, Design Changes Needed</i>	05/01
01-24	<i>Justification Review: Health Care Regulation Program Agency for Health Care Administration</i>	05/01
01-10	<i>Justification Review: Growth in Medicaid Prescription Drug Costs Indicates Additional Prudent Purchasing Practices Are Needed</i>	02/01
<b>Health, Department of</b>		
06-02	<i>OPPAGA Report: Nurse Licensure Compact Would Produce Some Benefits But Not Resolve the Nurse Shortage</i>	01/06
05-49	<i>OPPAGA Report: Legislature Strengthens Pedigree Paper, Wholesaler Permit Requirements to Better Ensure Safe Prescription Drugs</i>	10/05
05-33	<i>OPPAGA Report: EMS Program Has Taken Little Action to Improve Provider Compliance with Safety Standards</i>	05/05
05-10	<i>OPPAGA Report: Healthy Communities, Healthy People Activities Effectively Monitored, But Assessment Could Improve</i>	03/05
04-79	<i>OPPAGA Report: Access to Mammography Services in Florida Is More Limited for Low-Income Women</i>	12/04
04-75	<i>OPPAGA Report: Florida's Public Health Preparedness Has Improved; Further Adjustments Needed</i>	11/04
04-71	<i>Progress Report: Medical Quality Assurance Improves Accountability System; Information Tracking Concerns Persist</i>	10/04
2005-043	<i>Auditor General: Department of Health, Health Care Practitioner Disciplinary Process (Operational Audit)</i>	10/04
04-66	<i>Progress Report: Brain and Spinal Cord Injury Program Improves Data Reliability, But Should Increase Medicaid Reimbursements</i>	09/04
04-35	<i>Progress Report: Children's Medical Services Working to Expand Privatization and Reduce Administrative Inefficiencies</i>	05/04
03-71	<i>Justification Review: State Faces Challenges to Improving Community Public Health in Florida</i>	12/03
03-25	<i>Justification Review: Emergency Medical Services Program Should Improve Provider Compliance with Safety Standards</i>	04/03
03-18	<i>Justification Review: Counterfeit and Diverted Drugs Threaten Public Health and Waste State Dollars</i>	02/03
03-06	<i>Justification Review: While Medical Quality Assurance Improving, Licensure Needs Increased Accountability</i>	01/03
03-02	<i>Justification Review: Brain and Spinal Cord Injury Program Reports Meeting Goal, Could Recover Additional Revenues</i>	01/03
02-48	<i>Progress Report: Legislature Improves Welfare Reform in Florida</i>	09/02

Report No.	Report Title	Published Date
02-04	<i>Special Report: Children's Medical Services Privatization is Feasible; Could Save Over \$18 Million, But Barriers Must Be Overcome</i>	01/02
<b>Persons with Disabilities, Agency for</b>		
05-39	<i>OPPAGA Report: Disabilities Groups Should Improve Coordination, But Duplication of Activities Appears to Be Low</i>	07/05
05-14	<i>OPPAGA Report: Vocational Rehabilitation Program's Performance Has Been Mixed Since the Abolishment of Occupational Access and Opportunity Commission</i>	03/05

**OPPAGA Contacts:**

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Becky Vickers, Staff Director, (850) 487-1316, or [vickers.becky@oppaga.fl.gov](mailto:vickers.becky@oppaga.fl.gov)





Recent Recommendations by  
Health Care Task Forces,  
Commissions, Associations,  
etc.

## Recent Recommendations

Governor's Task Force on Access to Affordable Health Insurance (2004)  
[http://ahca.myflorida.com/affordable\\_health\\_insurance/010904\\_meeting/recommendations\\_report\\_010904.pdf](http://ahca.myflorida.com/affordable_health_insurance/010904_meeting/recommendations_report_010904.pdf)

Florida Health Insurance Study (2004) The Study was created to provide reliable estimates of the percentage and number of Floridians without health insurance.  
[http://ahca.myflorida.com/Medicaid/quality\\_management/mrp/Projects/fhis2004/reports.shtml](http://ahca.myflorida.com/Medicaid/quality_management/mrp/Projects/fhis2004/reports.shtml)

Florida's Blue Ribbon Task Force (BRTF) on Inclusive Community Living, Lifelong Transition, and Employment of Persons with Developmental Disabilities (2004)  
<http://apd.myflorida.com/btrtf/docs/finalreport12-15-04.pdf>

FHA Task Force Report on Addressing the Crisis in Emergency Care (2005)  
<http://www.fha.org/edreportfront.html>

National Report Card on Emergency Care – Florida (2005)  
<http://www.fcep.org/pdfs/ACEPReportCard.pdf>

Florida Commission on Excellence in Health Care (2001)  
<http://www.doh.state.fl.us/mqa/FCHCE/FCHCEfinalrpt02-01-01.pdf>

Governor's Select Task Force on Healthcare Professional Liability (2003)  
<http://www.hcla.org/studies/FLgovernorstaskbook.pdf>

The Florida Commission on Mental Health and Substance Abuse (2001)  
<http://www.fmhi.usf.edu/fcmhsa/finalreports.html>

The Governor's Blue Ribbon Panel on Child Protection (2002)  
<http://www.myflorida.com/myflorida/government/otherinfo/blueribbon.html>

Report of the Hospital Certificate of Need Workgroup (2005), AHCA  
[greggi@ahca.myflorida.com](mailto:greggi@ahca.myflorida.com)

Joint Commission on Accreditation of Healthcare Organizations, Strategies for Improving the Medical Liability System and Preventing Patient Injury (2005)

[http://www.jcaho.org/about+us/public+policy+initiatives/tort\\_resolution.htm](http://www.jcaho.org/about+us/public+policy+initiatives/tort_resolution.htm)

Guardianship Task Force Final Report (2004)

[http://elderaffairs.state.fl.us/english/PUBGUARD/guardianship\\_task\\_force.html](http://elderaffairs.state.fl.us/english/PUBGUARD/guardianship_task_force.html)

The Obesity Epidemic in Florida (2001 report)

<http://www.doh.state.fl.us/Family/obesity/documents/report.pdf>



# Legislatively Mandated Reports

LEGISLATIVELY MANDATED REPORTS - Department of Children & Families						
ASSIGNED TO	SUBJECT	FREQUENCY	STATUTORY REFERENCE	DUE DATE	SUBMITTED TO	STATUS
CIO	AGENCY ANNUAL ENTERPRISE RESOURCE PLANNING AND MANAGEMENT REPORT	ANNUALLY	s. 282.3063(1), F.S.	11/15/05	STATE TECHNOLOGY COUNCIL, EXECUTIVE OFFICE OF GOVERNOR, JOINT INFORMATION TECHNOLOGY RESOURCE COMMITTEE	SUSPENDED 09/20/05 This report has been suspended due to the abolishment of the STO. No further action required.
PDFS	CHILD AND FAMILY SERVICES ANNUAL PROGRESS REPORT	ANNUALLY / S05-000882 see also S05-000699	s. 39.001(8), F.S.	09/01/05	SPEAKER OF THE HOUSE, PRESIDENT OF THE SENATE	COMPLETED 09/23/05
OCOC & PDFS	ONE-CHURCH, ONE-CHILD SUMMARY	ANNUALLY / S05-000875	s. 409.1755(3)(b)5, F.S.	09/01/05	LEGISLATURE	COMPLETED 10/03/05
PDMH/PDSA	COMPLIANCE BY SUBSTANCE ABUSE & MENTAL HEALTH PROVIDERS	ANNUALLY / S05-000846	s. 394.745, F.S.	11/01/05	PRESIDENT OF THE SENATE, SPEAKER OF THE HOUSE	COMPLETED 10/04/05 - Email reminder sent to PDMH and PDSA 11/01/05
PDFS	NUMBER OF CHILDREN PLACED IN RESIDENTIAL GROUP CARE & NUMBER FOR WHOM PLACEMENT WAS UNAVAILABLE	ANNUALLY / S05-000876	s. 39.523(5)(a), F.S.	12/01/05	LEGISLATURE	COMPLETED 12/13/05 11/01/05 - Email reminder sent to PDFS 11/29/05 - Email reminder sent to PDFS 12/15/05 - Email reminder sent to PDFS
COMMISSION ON MARRIAGE & FAMILY SUPPORT INITIATIVE	PROGRESS REPORT	ANNUALLY / S05-001052	s. 383.115(3)(d), F.S.	12/31/05	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER, CHIEF JUSTICE OF SUPREME COURT	COMPLETED 12/27/05 11/01/05 - Email reminder sent to Cyndee Odom 12/15/05 - Email reminder sent to Cyndee Odom
PDFS	REVENUE MAXIMIZATION REPORT	ANNUALLY / S05-000877	s. 409.017(3)(g), F.S.	01/01/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER	COMPLETED 12/28/05 12/12/05 - Email from Becky Lyons - This report is the same as 409.26731
AS	ANNUAL LOSS PREVENTION REPORT	ANNUALLY / S05-001046	s. 284.50(3), F.S.	01/15/06	GOVERNOR	COMPLETED 12/28/05 12/15/05 - Email reminder sent to AS

ASSIGNED TO	SUBJECT	FREQUENCY	STATUTORY REFERENCE	DUE DATE	SUBMITTED TO	STATUS	COMMENTS
PDFS	REPORT ON QUALITY PERFORMANCE & OUTCOME MEASURE ATTAINMENT BY SHERIFFS	ANNUALLY / S06-000032	s. 39.3065(3)(d), F.S.	01/31/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER	COMPLETED 02/01/06	01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS
PDFS	QUALITY PERFORMANCE & OUTCOME MEASURE ATTAINMENT & COST EFFICIENCY OF FOSTER CARE PRIVATIZATION	ANNUALLY	s. 409.1671(4)(a), F.S.	01/31/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER, MINORITY LEADERS		01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS
PDFS	PRIVATIZATION OF FOSTER CARE	ANNUALLY	s. 409.1671(4)(a), F.S.	01/31/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER, MINORITY LEADERS		01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS
PDAS see email	MULTI-YEAR PLAN FOR THE NEEDS OF DISABLED ADULTS	EVERY 3 YEARS	ss. 410.0245(2) & 410.604(10), F.S.	03/01/08	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER		
PDAS	ANALYSIS OF STATUS OF IMPLEMENTATION OF MULTI-YEAR PLAN	INTERIM YEARS	s. 410.0245(2), F.S.	03/01/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER		02/01/06 - Email reminder sent to PDAS
PDFS	CHILDREN IN FOSTER CARE	ANNUALLY	s. 409.1685, F.S.	03/01/06	SUBSTANTIVE COMMITTEES		02/01/06 - Email reminder sent to PDFS
AS	RECYCLED PAPER EXPENDITURE REPORT	ANNUALLY	s. 287.045(11), F.S.	07/01/04	MANAGEMENT SERVICES		Per Wayne Clotfelter, this issue was transmitted electronically.
PDAS	EVALUATION OF PROGRESS OF COMMUNITY CARE FOR DISABLED ADULTS	BIENNIALLY / S05-000862	s. 410.604(10), F.S.	10/01/05	SENATE PRESIDENT, HOUSE SPEAKER	COMPLETED 09/29/05	

ASSIGNED TO	SUBJECT	FREQUENCY	STATUTORY REFERENCE	DUE DATE	SUBMITTED TO	STATUS	COMMENTS
PDFS	STATE PLAN FOR THE PREVENTION OF ABUSE, ABANDONMENT AND NEGLECT	EVERY FIVE YEARS	s. 39.001(8), F.S.	06/30/06	SPEAKER OF THE HOUSE, PRESIDENT OF THE SENATE		
OSLS	ADMINISTRATIVE RULES REVIEW	BIENNIALLY / S05-000886	s. 120.74(2), F.S.	10/01/05	SENATE PRESIDENT, HOUSE SPEAKER, APPROPRIATE STANDING COMMITTEES	COMPLETED 10/04/05	
OSLS	RULE WAIVER/VARIANCE REPORT	ANNUALLY / A05-009047	s. 120.542(9), F.S.	10/01/05	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER	COMPLETED 09/23/05	
OSIG	OFFICE OF INSPECTOR GENERAL ANNUAL AUDIT REPORT	ANNUALLY	s. 20.055(5)(h), F.S.	09/30/05	AUDITOR GENERAL	COMPLETED 10/05/05	Completed based on 10/05/05 email from Sheryl Steckler.
AS	LONG-RANGE PROGRAM PLAN	ANNUALLY / A05-008592	s. 186.021, F.S.	09/15/05	EOG, SENATE PRES., HOUSE SPEAKER, AUDITOR GENERAL	COMPLETED 09/15/05	NO DUE DATE SPECIFIED
PDAS	NUMBER OF FALSE REPORTS OF ABUSE, NEGLECT OR EXPLOITATION OF DISABLED ADULT OR ELDERLY PERSON REFERRED TO LAW ENFORCEMENT	ANNUALLY	s. 415.111(5)(a), F.S.	07/15/06	LEGISLATURE		
SECRETARY	CERTIFICATION OF DISTRICT AND CBC LEAD AGENCY READINESS	30 DAYS AFTER EACH EXIT CONFERENCE	s. 409.1671(1)(b)4., F.S.		GOVERNOR & LEGISLATURE		NO DUE DATE SPECIFIED
PDGD	EVALUATION OF FAMILY DAY CARE HOMES	ANNUALLY	s. 402.313(7), F.S.		FOR DEPARTMENT USE ONLY		NO DUE DATE SPECIFIED
PDMH/PDSA	SERVICES ON SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES TO OLDER ADULTS	NOT SPECIFIED	s. 394.9081, F.S.		NOT SPECIFIED		Per Susan Dickerson, this information is included in their annual plan.
PDFS	PROGRESS TOWARD IMPLEMENTING RESIDENTIAL GROUP CARE PROGRAM	MONTHLY	s. 409.1679(1), F.S.		LEGISLATURE		NO DUE DATE SPECIFIED



ASSIGNED TO	SUBJECT	FREQUENCY	STATUTORY REFERENCE	DUE DATE	SUBMITTED TO	STATUS	COMMENTS
PDFS	NUMBER OF FALSE REPORTS OF CHILD ABUSE, ABANDONMENT OR NEGLECT REFERRED TO LAW ENFORCEMENT	ANNUALLY	s. 39.205(4), F.S.		LEGISLATURE		NO DUE DATE SPECIFIED
PDDV	DOMESTIC VIOLENCE REPORT	ANNUALLY / S06-000985	s. 39.904 F.S.	01/01/06	SENATE PRESIDENT, HOUSE SPEAKER	COMPLETED 12/08/05	12/15/05 - Email sent to PDDV
PDES	FOOD STAMP PROGRAM VIOLATIONS REPORT	ANNUALLY / S06-001042	s. 414.34, F.S.	01/01/06	SENATE PRESIDENT, HOUSE SPEAKER, SENATE CF&S COM., HOUSE C&FE COM., FDLE	COMPLETED 12/30/05	12/15/05 - Email sent to PDES 12/28/05 - Email sent to PDES
PDHO	ANNUAL REPORT ON HOMELESS CONDITIONS IN FLORIDA	ANNUALLY	s. 420.623(4), F.S.	06/30/06	GOVERNOR, SENATE PRESIDENT, HOUSE SPEAKER		
ADVISORY COUNCIL	INDEPENDENT LIVING ADVISORY COUNCIL REPORT	ANNUALLY / S06-000001	s. 409.145(7)(b), F.S.	12/31/05		COMPLETED 02/03/06	11/01/05 - Email reminder sent to PDFS 12/15/05 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS
ADVISORY COUNCIL	DEPARTMENT'S RESPONSE TO INDEPENDENT LIVING ADVISORY COUNCIL RECOMMENDATIONS	ANNUALLY / S06-000002	s. 409.145(7)(b), F.S.	12/31/05		COMPLETED 02/03/06	11/01/05 - Email reminder sent to PDFS 12/15/05 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS
PDFS	CBC PERFORMANCE REPORT	ANNUALLY	s. 409.1671 F.S.	01/31/06			01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS

ASSIGNED TO	SUBJECT	FREQUENCY	STATUTORY REFERENCE	DUE DATE	SUBMITTED TO	STATUS	COMMENTS
SM	EVALUATION OF SUBSTANCE ABUSE AND MENTAL HEALTH PROGRAMS	ANNUALLY / A06-000106	HB 1837, SECTION 21	12/31/05		COMPLETED 01/04/06	11/01/05 - Email reminder to BH 11/02/05 - Responsibility for this report rests with the SAMH Corp. BH will coordinate 12/15/05 - Email reminder sent to BH
ASHR	REQUESTS FROM COMMERCIAL ENTITIES FOR SOCIAL SECURITY NUMBERS OF EMPLOYEES	ANNUALLY / S06-000037	s. 119.0721, F.S.	01/31/06			01/03/06 - Email reminder sent to AS 01/27/06 - Email reminder sent to AS
PDFS	CHILD WELFARE TRAINING	AS NEEDED	s. 402.40(9), F.S.				
PDFS	MENTAL HEALTH CARE SERVICES FOR MINORS AND INCAPACITATED PERSONS (PSYCHOTROPIC MEDS)	ANNUALLY	CHAPTER 2005-65 LOF, SECTION 5	02/01/06	LEGISLATURE		01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Email reminder sent to PDFS
PDFS	ANNUAL EVALUATION OF COMPREHENSIVE RESIDENTIAL GROUP CARE SERVICES AND MODEL COMPREHENSIVE RESIDENTIAL SERVICES PROGRAMS	ANNUALLY	s. 409.7679(2), F.S.	01/31/06	LEGISLATURE		01/03/06 - Email reminder sent to PDFS 01/27/06 - Email reminder sent to PDFS 02/01/06 - Overdue email reminder sent to PDFS

## DOEA – Reports & Councils

The list of reports below only pertains to those required in Florida Statutes. The Department of Elder Affairs is required to complete dozens of other reports required by federal agencies, the Florida Department of Management Services and other organizations.

Title of Report	Division or Office Responsible for Preparing and Submitting Report	Due Date	Florida Statutes	Recipients of the Report
Agency Evaluation and Justification Review	Division of Administrative Services	October 1 (annual)	Section 11.513, F.S.	OPPAGA
Agency Financial Statements	Division of Administrative Services	September 30 (annual)	Section 216.102, F.S.	Chief Financial Officer
Aging Resource Centers Pilot Progress Report	Division of Volunteer & Community Services	June 30, 2006 (one-time)	Section 430.205(6)(c)(2), F.S.	Governor, House & Senate
Aging Resource Center Report on Feasibility of Administering Additional Services	Division of Volunteer & Community Services	December 1, 2006 (one-time)	Section 430.2053 (20) F.S.	Governor, House & Senate
Annual Loss Prevention Report	Division of Administrative Services	January 15 (annual)	Section 284.50, F.S.	Governor
Annual Report Summarizing Monitoring Activities	Division of Administrative Services	January 1 (annual)	Section 430.0401, F.S.	Governor, House & Senate
Assessment of Facility Needs	Division of Administrative Services	September 15 (annual)	Section 216.0158, F.S.	Governor
Certified Forward Report	Division of Administrative Services	August 1 (annual)	Section 216.301, F.S.	Governor
Consumer Directed Care Statewide Program	Division of Volunteer & Community Services (in collaboration with AHCA)	January 15 (annual)	Section 409.221, F.S.	House & Senate
Extended Congregate Care	Division of Volunteer & Community Services	January 1 (Annual)	Section 400.407, F.S.	Governor, House & Senate
Gold Seal Report	Long-Term Care Ombudsman Program	Provided as Required	Section, 400.235(5)(f), F.S.	Gold Seal Panel
Inventory of State-Owned Facilities and State-Occupied Facilities	Division of Administrative Services	In a manner prescribed by DMS	Section 216.0152, F.S.	Department of Management Services
Legislative Budget Request	Division of Administrative Services	October 15 (annual)	Section 216.023, F.S.	Governor, House & Senate
Lobbyist Expenditure Report	Office of Legislative Affairs	Semi-annually (45 days after reporting period)	Section 11.045(3), F.S.	Lobbyist Registration Office

Long Range Program Plan	Division of Administrative Services	September 30 post on website (annual); June 30 amend based on GAA (annual)	Section 216.013, F.S.	Governor, House & Senate
Long-Term Care Ombudsman Program	Long-Term Care Ombudsman Program	30 Days Before Convening of Regular Legislative Session to Secretary of DOEA (annual)	Section, 400.0067(2)(f), F.S.	Governor, House & Senate
Inspection of Long-Term Care Facilities Implementation	Long-Term Care Ombudsman Program	No Date (annual)	Section 400.441(4), F.S.	House & Senate
Master Plan on Aging Implementation	Division of Administrative Services	No Date (annual)	Section 430.04, F.S.	Governor, House & Senate
Minority Vendor Utilization Report	Division of Administrative Services	No Date (annual)	Section 287.09451, F.S.	Department of Management Services
Performance Standards Adjustments	Division of Administrative Services	June 30 (annual)	Section 216.023(6), F.S.	Governor
Quarterly Energy and Water Consumption Report	Division of Administrative Services	Quarterly	Section 255, F.S.	Department of Management Services
Report on Compliance on use of Minority Business	Division of Administrative Services	No Date (annual)	287.042(10) F.S.	Department of Management Services
Reports Statutorily Required, Provisions for Abstracts as Fulfillment of Required Abstracts and 1 Copy	General Counsel	No Date (annual)	286.001 F.S.	Fl. Department of State
Rule Reports: Certifying Agency Compliance with Chapter 120 F. S.	General Counsel	October 1 (odd years)	Chapter 120, F.S.	Governor's office, President/Senate, Speaker/House
Statewide Public Guardianship Office Annual Report	Statewide Public Guardianship Office	January 1 (Annual)	Section 744.7021, F.S.	Secretary of DOEA (Department elected to distribute to Governor & Legislature)
Summary of Programs and Services		Target date is beginning of each regular legislative session	Not required by law	House & Senate

Sunshine for Seniors Legislative Update Report	SHINE	January 1 (Annual)	Section 430.83, F.S.	Governor, House & Senate
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### Board and Council Membership & Participation

- Department of Elderly Affairs Advisory Council
- Community Assistance Advisory Council
- Florida Developmental Disabilities Council
- State Mental Health Planning Council
- Florida Interagency Grants and Funding Council
- Florida Cardiovascular Health Council
- Florida Coordinating Council for Deaf & Hard of Hearing
- Florida Injury Prevention Advisory Council
- Osteoporosis Advisory Council
- Florida Interagency Food & Nutrition Committee
- Governor's Office of Drug Control/Suicide Prevention Task Force
- Workforce Florida Board
- Governor's Front Porch Initiative
- Governor's Mentoring Initiative
- Florida Arthritis Partnership Coordinating Council
- Commission for the Transportation Disadvantaged
- Florida Interagency Food & Nutrition Council
- Alzheimer's Disease Initiative Council
- State Long-Term Care Ombudsman Council

Legislatively Mandated Reports - Department of Health

ONE-TIME  
ASSIGNMENTS

2006

No.	Assigned To	Subject	Statutory Cite	Due to Legislature	Status
1	MQA	Study on whether medical review panels should be included as a part of the presuit process in medical malpractice litigation	SB 2-D Ch. 2003-416, LOF	12/31/2003	Complete
2	HSCM	Coordinating Council for the Deaf and Hard of Hearing must submit a report to the Governor and Legislature regarding the feasibility and necessity of regulating interpreters.	CS/CS/SB 206 ER (2004 Session) Section 1, page 6 No statutory reference	1/1/2006	Complete
3	HSD	Interim Reports on strategies and actions to reduce the costs and burdens of cervical cancer in Florida.	CS SB 2002 ER (2004 Session) Section 15, p. 38 - 39 No statutory reference	1/1/2006, 7/1/2007 and 6/30/2008	Complete
4	HSD	Requires the DOH, in conjunction with the University of Florida, conduct an Inflammatory Bowel Disease epidemiological study with a report due February 1, 2006 to the Governor, President of the Senate, and Speaker of the House of Representatives.	HB 869 ER (2005 Session) (Section 2) No statute shown	2/1/2006	Complete
5	HPE	Requires the DOH, along with the Department of Revenue, Florida Association of Court Clerks, Florida Hospital Association and one or more local registrars to conduct a study on the feasibility of electronically filing original and new or amended birth certificates, documentation of paternity, etc., with a report to the Governor, President and Speaker.	HB 1283 ER (Section 20) s. 382.357, F.S.	7/1/2006	

## Legislative Required Reports Agency for Health Care Administration

Subject	Authority	Requirement	Submit To
Revised Performance Standards	Section 216.023(7), F.S.	Annual: Adjustments to performance standards based on legislative session.	OPB/House and Senate Appropriations
CARES Program Operation	Section 409.912(15)(e), F.S.	Annual: AHCA & DOEA submit annual report on operation of CARES.	Legislature/Office of Long Term Care Policy
Florida Kidcare Evaluation Report	Section 409.8177(1), F.S.	Annual: AHCA, in consultation with DOH, DCF & Florida Healthy Kids contract for evaluation and report on KidCare program	Governor, Speaker, and President of the Senate
State Health Data Catalog	Section 408.05(4)(b), F.S.	Annual: Catalog of health data maintained by state agencies update annually.	Public
Certified Forwards	Section 216.301(1)(a) F.S.	Annual: Certification of prior year obligations - certified forward.	Executive Office of Gov - Office of Policy and Budget
Health Flex	Section 408.909 (9)	Annual: Evaluation report on Health Flex program submitted jointly with OIR.	Governor, President and Speaker
Transparency/ Performance Data	HB 0811	Annual: Initial plan, updated annually, long range plan for making performance data available.	Governor and Legislature
Medicaid Fraud and Overpayments Report	Section 409.913, F.S.	Annual: Joint report with MFCU documenting effectiveness of efforts to control fraud.	Legislature
Legislative Budget Request	Section 216.023(1), F.S.	Annual: Legislative budget request and all supporting forms and schedules.	Governor/Legislature
Minority Business Enterprise Utilization Plan	Section 287.09451(6)(a) F.S.	Annual: Minority business enterprise utilization plan.	DMS, Office of Supplier Diversity
Agency Financial Statements	Section 216.102(1), F.S.	Annual: Prepare and submit Agency financials using GAAP.	DFS (Comptroller)
Certification of Local Matching Funds	Section 409.908(1)(a)(4), F.S.	Annual: Prepare annual statement describing activities undertaken using such funds. Line 4.	
Agency Litigation Inventory Update	Section 216.023(8), F.S;	Annual: Provide an update of any additions or changes to the litigation inventory since the submission of the Agency's Legislative Budget Request.	Governor and Legislature
EPSDT (Child Health Check Up) Screening Rates	Section 409.912(28), F.S.	Annual: Publication of EPSDT services screening rates.	Center for Medicare and Medicaid Services
Statewide Provider/Managed Care Dispute Prgm.	Section 408.7057(2)(g)2., F.S.	Annual: Report # of claims dismissed, defaults issued, and failure to comply with Agency orders.	Governor/Legislature



## Legislative Required Reports Agency for Health Care Administration

Disclosure of Social Security #.	Section 119.072(6), F.S.	Annual: report identifying all commercial entities requesting Soc. Sec. #.	Secretary of State, Senate President/Speaker of House
Facilities Fined List	Section 400.419(13), F.S.	Annual: Report of all facilities fined \$5000 or more for violations of state standards.	DOEA/DOH/DCF/AHCA area offices
State Ctr for Hlth Stats Expenditures	Section 408.063(5), F.S.	Annual: Report of all state health expenditures.	Public
Health Systems Development	Section 409.912 (44), F.S.	Annual: Report of audit results to ensure cost effectiveness relating to Medicaid Managed Care	Governor, President and Speaker
Minority Physicians Network	Section 409.912 (49), F.S.	Annual: Report of audit results to ensure cost effectiveness relating to Minority Physicians Network	
Pharmaceutical Expense Asst. Program	Section 409.9065(4)(b), F.S.	Annual: Report of operation of program.	Legislature
State Center for Health Statistics	Section 408.05(5)(d), F.S.	Annual: Report of SCHS activities.	Public
Transparency/ Performance Data	Section 408.062 (1) (j), F.S.	Annual: Report on collection and publication of performance outcome indicators.	Gov., Speaker, Pres., subs. comm.
Integrated Therapies Pilot Program	Chapter 2004-268 L.O.F., Proviso following S.A. 202	Annual: Report on cost-effectiveness of pilot project to improve Medipass disease management	Governor and Approp. Committees
Integrated Therapies Pilot Program	Chapter L.O.F., Proviso following S.A. 190/ 2005	Annual: Report on cost-effectiveness of pilot project to improve Medipass disease management (Requirement is a renewal of requirement in proviso from 2002, 2003, 2004)	Governor and Approp. Committees
Nursing Care Cost Report	Section 409.908(2)(b)5, F.S.	Annual: Report on direct and indirect care costs.	Legislature
Choosing a Quality Health Plan	Section 408.05(5)(a), F.S.	Annual: Report on Florida Licensed Health Maintenance Organizations.	General Public
Open Heart/CON Exemptions	Section 408.036(3)(1)(2), F.S.	Annual: Report on number of requests for exemptions received, granted, denied (open heart/replacement hospital).	Legislature
Open Heart/CON Exemption	Section 408.036(3)(m)(3), F.S.	Annual: Report on number of requests for exemptions received, granted, denied (open heart/ out migration).	Legislature
Nursing Home/ALF Adverse Incident	Section 400.147(14), F.S.	Annual: Report on Nursing Home and ALF Adverse Incidents.	Legislature
Annual Loss Prevention Report	Section 284.50(3), F.S.	Annual: Report on prevention of job-related employee accidents.	Governor



## Legislative Required Reports Agency for Health Care Administration

Patient Safety Corp.	Section 381.0271 (8), F.S.	Annual: Report on start-up activities and any other proposals for legislative action.	Governor, President, Speaker
DMS Annual Perquisite Report	Chapter 60L-32.004(4) F.A.C.	Annual: Report showing any perquisites provided to employees	DMS
Consumer Directed Care Program	Section 409.221(4)(k), F.S.	Annual: Report that includes the Agency/DOEA/DCF's review and recommendations for the program.	Legislature
Caesarean Section Report	Section 408.062(2), F.S.	Annual: Report.	Gov/Senate Pres/Speaker
Savings Sharing Report	Section 110.1245(1), F.S.	Annual: Savings Sharing update of those employees that have submitted ideas that result in reducing or eliminating state expenditure	DMS/ Personnel Management
Annual Audit Plan	Section 20.055(5)(h), F.S.	Annual: Schedules engagement for the upcoming fiscal year.	Secretary/ Chief IG/ Auditor General
Long Range Program Plan	Section 216.013(3) F.S.	Annual: Submission of the Agency's Long Range Program Plan.	Executive Office of Gov/Chairs of Appropriations
Capital Improvement Plan	Section 216.0158(2) F.S.	Annual: Submit a short-term term plan for facility needs covering 5-years.	Executive Office of Gov - Office of Policy and Budget
Risk Assess. Blds, Facilities and Structures	Section 943.0311 (2)(a), F.S.	Annual: Submit annual Facility Vulnerability Assessments to FDLE.	FDLE (Domestic Security Chief
Service First Bonus Plan	Section 110.1245(2), F.S.	Annual: Submit annual plan for lump-sum bonus.	Executive Office of Gov - Office of Policy and Budget
Safety Program Evaluation Report	Section 284.50 (1), F.S.	Annual: Submit annual report to the Division of Risk Services at DFS.	Division of Risk Services
Public Depositor	Section 280.17(6), F.S.	Annual: Submit annual report to the State Treasurer (now DFS).	Chief Financial Officer (DFS)
Local Funding Revenue Maximization Act - II	Chapter 2003-146 L.O.F., Section 1(3)(g)	Annual: Submit report documenting specific activities undertaken last FY.	Governor/Senate President/Speaker
Office of the Inspector General Annual Report	Section 20.055(7), F.S.	Annual: Summary of all activities within the Inspector General's office for the previous fiscal year.	Secretary/ Chief IG
Florida Kidcare Evaluation Report	Section 409.8177(1), F.S.	Initial/ One Time: AHCA, in consultation with DOH, DCF & Florida Healthy Kids contract for evaluation and report on KidCare program.	Governor, Speaker, and President of the Senate

## Legislative Required Reports Agency for Health Care Administration

Inflammatory Bowel Disease	HB 0869	Initial/ One Time: Chronic disease study on Medicaid Coverage for therapies required by patients with IBD.	Governor, Speaker, and President of the Senate
Infection Rates	HB 0811	Initial/ One Time: Release data relating to Infection Rates	General Public
Long Term Care Partnership	SB 1208	Initial/ One Time: the Agency shall develop a plan for implementation and present plan in the form of recommended legislation to the President of the Senate and the Speaker of the House prior to the commencement of the next legislative session.	Speaker, and President of the Senate
Independent Living/ Health Insurance Needs	SB 1314	Initial/ One Time: The Independent Living Advisory Council: DCF and AHCA shall assist the advisory council in conducting a study to determine the most effective way to address the health insurance needs of those in the program. Council shall report to Legislature 1/2/2006.	Legislature
Prescription Drug Education Project	S.A. 204, SB 2600	Initial/ One Time: The project shall be evaluated for actual cost savings by the agency by January 1, 2006	N/A
Florida Mental Health Institute (FMHI)	Section 394.9082(9), F.S.	Initial/One Time: Based on FMHI study AHCA and DCF must provide report on strategies.	Gov/Senate Pres/Speaker
Medicaid Independent Estimates	Chapter 2004-268 L.O.F., Proviso following S.A. 188a	Initial/One Time: Independent estimate and analysis of the growth in Medicaid expenditures for FY 2004-06.	Governor, Legislature
Integrated Long-Term Care	Section 430.205 (6)(c)1., F.S.	Initial/One Time: Monitor newly integrated long-term care programs and report on their progress.	Governor/ President and Speaker
Integrated Long-Term Care with Medicare	Section 430.205 (6)(d)2., F.S.	Initial/One Time: Plan for including Medicare in the integrated long-term care system.	Gov/Senate Pres/Speaker
Medicaid/ Payor of Last Resort	SB 0838	Initial/One Time: Recommendations to ensure that Medicaid is Payor of Last Resort; recommend whether modification to contingency fee contract could enhance TPL benefits.	Legislature
Performance Measure Data	HB 0811	Initial/One Time: Release date relating to performance outcome and member and subscriber cost data	General Release
Florida KidCare Enrollment Report	Section 409.8177(2), F.S.	Monthly: Report on enrollment for each component of Florida KidCare Program.	Gov/Senate Pres/Speaker
Medical Encounter Data System	Chapter 2004-268 L.O.F., Proviso following S.A. 185	Monthly: Status report on State Medical Encounter Data System.	Governor and Appropriations Chairs

# Legislative Required Reports Agency for Health Care Administration

Procurement	Section 287.057(6), F.S.	Quarterly: Agency shall report all such actions to DMS re: professional service procurements.	Department of Management Services
Clearing Accounts	Section 17.58(4), F.S.	Quarterly: Furnish statement listing each clearing account and revolving fund.	Chief Financial Officer (DFS)
Medical Encounter Data System	Chapter 2004-268 L.O.F., Proviso following S.A. 185	Quarterly: Prepare detailed operational work plan prior to release of SMEDS funds for second, third, & fourth quarters/update plan quarterly.	Governor and Appropriations Chairs
Medicaid Prescribed-Drug Spending Control	Section 409.912 (39)(c), F.S.	Quarterly: Report must include at least the progress made in implementing this subsection and its effect on Medicaid prescribed-drug expenditures.	Gov/Senate Pres/Speaker
Quarterly Position Report	Section 216.181(10)(c), F.S.	Quarterly: State agencies must report on # of filled and vacant positions.	LBC
Hospital Adverse Incident Report	Section 395.0197(8), F.S.	Quarterly: Summary of trend analysis of adverse incidents.	AHCA website
Assisted Living Facilities	Section 400.408(1)(i), F.S.	Semi-annual: Workgroup report of findings, actions and recommendations.	Director of Health Facility Regulation

## Required Reports to the Governor and Legislature - Agency for Persons with Disabilities

	Name of Report	Report Description	Responsible Branch	Statutory Cite	Recipient	Due Date	Expires Date
1	Appropriations Transfers	Report changes in the AOB, release of appropriation, and movement of funds from one category to another within the budget entity.	Budget	216.292	Governor/Chair of Appropriations Committees	3 days prior to implementation	
2	Chief Financial Officer	Show financial position and results of operations as of 6/30. Report expenditures of each available funding stream	Chief Financial Officer (DFS) DCF on behalf of APD.	17.17, 17.54, 216.102	Governor/Pres Senate/Spkr House	9/30/05	
3	Inspector General	Submit long-term and annual audit plan based on risk assessments. Include post audit samplings of payments and accounts, individual audits to be conducted, related resources to be devoted to each audit. Submit a report addressing activities relative to assessment and validation of performance measures; significant abuses and deficiencies relating to the operations of the agency; recommendations for corrective actions; recommended corrective actions not completed; summary or each audit and investigation completed.	IG	20.055	Governor/Chief IG/Auditor General	9/30/05	
4	Loss Prevention Program	Reports activities to prevent job-related accidents and suggestions of safeguards and improvements.		284.5	Governor	1/15/06	
5	Administrative Rules	Provides the number of petitions for variance or waiver from rules and the disposition of the petition. Petitions for temporary or emergency variances and waivers and dispositions are reported separately.		120.542	Governor/Pres Senate/Spkr House	10/1/05	

## Required Reports to the Governor and Legislature - Agency for Persons with Disabilities

	Name of Report	Report Description	Responsible Branch	Statutory Cite	Recipient	Due Date	Expires Date
6	Financial Reports	See #2 above	DFS Financial Support sends info to DFS via DCF	216.102	Governor	9/30/05	
7	Performance Measures and Standards of Adjustments	Reports funding needs for the next fiscal year.		216.023	Governor	10/15/05 unless alternative date agreed on	
8	Lobbying Activities	Reports any expenditure for the purpose of lobbying	Legislative Affairs	11.045, 11.062	House, Senate	8/15 and 2/15	
9	Savings Sharing Program	A plan outlining the awarding of lump-sum bonuses. Includes statement bonuses are subject to specific appropriation; eligibility requirements; periodic evaluation process; peer input; breakdown of agency by division for the purposes of peer input and distribution; limiting bonuses to 35% of of total authorized positions.	Budget	110.1245	Governor	9/15	
10	Financial Status of Home & Community Based Services Waivers	Status reports regarding the financial status of the Home and Community Based Service Waivers. Include number of current clients being served through waiver; actual and projected cost information compared with the appropriation.	Budget and Operations	Appropriations 604-614	Governor, House Fiscal Council Chair, Senate Ways & Means Chair	Quarterly 10/30 01/30 04/30 07/30	
11	Implementation of Rate Standardization	Adjust rates to ensure operation within appropriation. Adjustments are based on approved rates as of 11/1/2003.	Contracts and Budget		Governor, House Fiscal Council Chair, Senate Ways & Means Chair	Quarterly 10/30 01/30 04/30 07/30	

## Required Reports to the Governor and Legislature - Agency for Persons with Disabilities

	Name of Report	Report Description	Responsible Branch	Statutory Cite	Recipient	Due Date	Expires Date
12	Report of Cash Awards	The dollar value and number of such awards given. If available, any additional information concerning employee satisfaction and feedback should be provided.	Administrative Services	SB 2602 (2005)	Governor, Speaker of the House, President of the Senate	March 1st, 2006	July 1st, 2006



# Health Care Survey



## HEALTH CARE SURVEY

**Member Name:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Legislative Assistant's Name:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**District Phone Number:** \_\_\_\_\_

**Tallahassee Phone Number:** \_\_\_\_\_

**Below is a partial list of types of health care entities and organizations. Which are you most interested in learning more about?**

- |                                    |  |
|------------------------------------|--|
| ____ Advocacy groups               | ____ Nursing                               |
| ____ Assisted Living organizations | ____ Nursing home organizations            |
| ____ Child welfare                 | ____ Other health care professional groups |
| ____ Children's health             | ____ Other provider groups                 |
| ____ Chronic diseases              | ____ Pharmaceutical companies              |
| ____ Dentistry                     | ____ Pharmacy industry                     |
| ____ Developmentally disabled      | ____ Physically disabled                   |
| ____ Health insurance companies    | ____ Physician groups                      |
| ____ Hospital organizations        | ____ Public health                         |
| ____ Managed care organizations    | ____ Substance abuse                       |
| ____ Mental health                 | ____ Women's health                        |
| ____ Minority health               |  |

**Other:** \_\_\_\_\_

**What types of health care issues are you most interested in?**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Do you have suggestions for improving your experience as a member of the Health and Families Council and/or its Committees?** \_\_\_\_\_

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## Calendar of Events

Calendar of Events for Health  
Related Associations for  
2006 Session

# February 2006

Sun Mon Tue Wed Thu Fri Sat

			1	2	3	4
5	6	7 <b>Florida Research Institute</b> 8am-12pm, 3rd floor rotunda, contact Jessica Hansen (850)224-3427	8 <b>Florida Research Institute</b> <b>Florida Assisted Living Association</b> 4:30-5:30 Holiday Inn	9 <b>Hepatitis Awareness</b> Dept. of Health, Hepatitis Awareness, 8am-2pm, 2nd floor rotunda, contact April Crowley (850)245-4444, ext. 2380	10	11
12	13	14	15	16 <b>Leon Co. Health Dept.</b> 11am-3pm, Historic Front Steps and Courtyard, contact Jacqueline Bauer (850)487-3162	17	18
19	20	21 <b>American Cancer Society</b> Historic Front Steps and 2nd floor rotunda, contact Linda Paige (813)253-0541 <b>Association of Othotist and Prosthetists</b> 8am-4pm, 3rd floor rotunda	22 <b>American Cancer Society</b> Historic Front Steps and 2nd floor rotunda, contact Linda Paige (813)253-0541 <b>Association of Othotist and Prosthetists</b> 8am-4pm, 3rd floor rotunda	23	24	25
26	27	28				

# March 2006

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9 American Red Cross 8am-5pm, Historic Front Steps and plaza level rotunda, contact Karen Hagan (850) 878-6080  American Heart Association 8am-4pm, 3rd Floor rotunda	10	11
12	13 FL Hospital Association Day 4-5:30 pm	14	15 Multiple Sclerosis Society Contact: Jennifer Lee (904)332-6810	16	17	18 Nova Southeastern University 9am-12 pm
19	20	21 Massage Therapy Association 8am-4pm, 3rd floor rotunda, contact Maureen Gilbert (321)768-6026  Suicide Prevention 8:30am-4:30pm, plaza level rotunda, contact Terry Smith (904)819-9431	22 Dentists Day contact Rusty Peyton (850)224-1089  FL Disability Council 8am-4pm, 2nd floor rotunda, contact Margaret Deleman (850)488-1284  Renal Coalition 8am-5pm, Historic Front Steps and 3rd floor rotunda, contact Melissa Hose (800) 604-5227	23 Dept. of Elder Affairs 8 am-5pm, Historic Front Steps, 3rd floor rotunda, contact Lisa Meyer (850)14-2353	24	25
26	27	28 Take Stock in Children 8am-3pm, Historic Front Steps, contact Kelly Mattox (904)791-5649  Florida Health Care Association( FHCA) Contact Tony Marshall	29 FHCA	30 Doctors Day contact Lisette Gonzalez (850)224-6496 AARP Plaza level rotunda, contact Leslie DeVust (850)577-6165 FL Pharmacy Association 8am-4pm, 3rd floor	31	

# April 2006

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6 <b>Dental Hygiene Association</b> 8am-4pm, 2nd floor rotunda, contact Tammi Miller (860)896-0603	7 <b>Doctors Day</b> Florida Medical Association, contact Jeff Scott(850)224-6496	8
9	10	11 <b>FL Health Freedom Coalition</b> 8am-4pm, 3rd floor rotunda	12	13	14	15
16	17	18 <b>FL Epilepsy Services</b> Plaza level rotunda, contact Susan Eddins (813)870-3414	19	20	21	22
23	24	25	26	27	28	29
30						